| | DECLARATION FOR P. | ATENTAPPLICATION | Dockei Number (Optional |
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| As a below named inventor, I her | aby declare that | | MR2349-945 |
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| My residence, post office address | and citizenship are as stated be | elow next to my name. | |
| believs I am the original, first and names are listed below) of the sub AUTOMATIC ANTI-ACCI | pject matter which is claimed and DENT ELECTRICAL OUTLE | d for which a patent is sought | on the invention entitled |
| which is attached hereto unless the | s iollowing box is checked: 💹 | | |
| was filed on | as United State | s Application Number or PCT- | International Application |
| Number | and was amended on | (i | i applicable). |
| I hereby state that I have reviewed amended by any amendment referr I acknowledge the duty to disclose it hereby claim foreign priority ben or inventor's certificate, or § 365(a) United States, listed below and have certificate, or PCT International application (s) (Number) | red to above. information which is material to p erits under 35 U.S.C. § 119(a)- of any PCT International applica e also identified below, by checki | patentability as defined in 37 (-(d) or § 365(b) of any foreig tion which designated at léas ing the box, any foreign applic | CFR §1.56. on application(s) for patent if one country other than the cation for patent or inventor's nich priority is claimed. Priority Not Claimed |
| (Number) | (Country) | (Day/Month/Year Filed) | |
| hereby claim the benefit under 35 U. | | , , | |
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| Application Number) | · (Filing Date) | | |
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